CHANNEL ISLAND FOX INTEGRATED RECOVERY TEAM June 23 04

TASK FORCE 1
Analysis 1.3

Fox Health Group: Trigger Points for Intervention in Wild Populations

The intervention strategy would be determined by the specific cause of morbidity or mortality and may include: 1) moving foxes from the wild to captivity for treatment, 2) vaccinating wild foxes, or 3) increased monitoring. Monitoring would include increased field observation and increased number of foxes who are radiocollared with mortality signals to enhance carcass retrieval. Radio-collared foxes should be located at least 2 times a week, and foxes with mortality signals should be retrieved within 24 hrs if possible. Monitoring may also include additional tests and/or observations specific to the disease outbreak. The Group took note of the fact that vaccine safety and efficacy in Island fox have not been tested for several significant diseases and that these tests should be carried out in advance of an outbreak.

Trigger points for specific diseases are outlined below. An additional trigger point should be the detection by pathology of a similar lethal disease process in two or more foxes. This trigger should activate intensive monitoring, as well as investigations as to the cause (both infectious agents and toxic compounds).

1. Rabies: One case confirmed by pathology or virus isolation.

Intervention strategies:

Vaccination of wild foxes Increased active monitoring

For mortality and for sick animals.

Euthanasia is recommended for sick animals.

Note: Rabies vaccination of human staff at the site is advisable.

2. Canine distemper virus: One case confirmed by pathology or virus isolation

Intervention strategies:

Vaccination of wild foxes Increased active monitoring

For mortality and for sick animals;

Recent retrospective as well as prospective serology should be done to assess population immunity and the progression of the epizootic (young-of-the-year provide best opportunity for evidence of recent

incursion)

Treat sick animals in an isolation facility

3. Parvovirus: One case confirmed by pathology or virus isolation

Intervention strategy:

Increase active monitoring

For mortality or sick animals;

Scat surveys for prevalence of diarrhea associated with virus;

Recent retrospective as well as prospective serology should be done to assess population immunity and the progression of the epizootic (young-of-the-year provide best opportunity for evidence of recent incursion)

Investigate strain of virus (requires isolation of virus)

Treat sick animals in an isolation facility

Note: Modified-live virus vaccines for CPV have not been tested for safety in Island fox and killed-virus vaccines may be ineffective.

4. Canine Adenovirus 1 (Santa Catalina only. Re: other islands have had previous exposure)

One case confirmed by pathology or virus isolation

Intervention strategy:

Increased active monitoring

For mortality or sick animals;

Recent retrospective as well as prospective serology should be done to assess population immunity and the progression of the epizootic (young-of-the-year provide best opportunity for evidence of recent incursion)

Investigate strain of virus (requires isolation of virus)

Treat sick animals in an isolation facility

Note: Modified-live virus vaccines for CAV-1 have not been tested for safety in Island fox.

Comment: Wouldn't an actual case (clinical illness or fatality) of CAV be cause for stepped-up monitoring on all the islands, regardless of immune status, similar to CPV?